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APPENDIX 20.

OPHTHALMOLOGY TECHNICIAN



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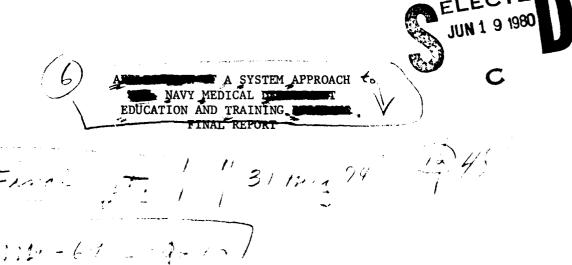
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APPENDIX 20.

OPHTHALMOLOGY TECHNICIAN



Prepared under Contract to OFFICE OF NAVAL RESEARCH U.S. DEPARTMENT OF THE NAVY

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Program Manager
Education and Training R&D
Bureau of Medicine and Surgery (Code 71G)

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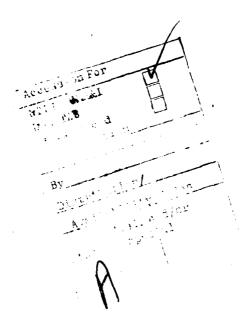
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The study objective consisted of a determina	
personnel in the Navy's Medical Department,	
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tion and training); and building a viable ca	reer pathway for all health
care personnel. Clearly the first task was	
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currently designated Navy enlisted occupations, 20 Naval Enlisted Classification Codes (NEC's) were computerized. A set of 16 groupings that cover all designated occupations was developed so as to enhance the effectiveness of professionals and sub-professionals alike.



FOREWORD

The project, "Application of a System Approach to the Navy Medical Department Education and Training Programs," was initiated in May of 1969 as a realistic, comprehensive response to certain objectives set forth in ADO 43-03X, and to memoranda from both the Secretary of Defense and the Assistant Secretary of Defense, Manpower and Reserve Affairs. The Secretary's concern was stated in his memorandum of 29 June 1965, "Innovation in Defense Training and Education." More specific concerns were stated in the Assistant Secretary's memorandum of 14 June 1968, "Application of a System Approach in the Development and Management of Training Courses." In this he called for "vigorous and imaginative effort," and an approach "characterized by an organized training program with precise goals and defined operational interrelation among instructional system components." He also noted, "Job analyses with task descriptions expressed in behavioristic terms are basic and essential to the development of precise training goals and learning objectives."

The Project

System survey and analysis was conducted relative to all factors affecting education and training programs. Subsequently, a job-analysis sub-system was defined and developed incorporating a series of task inventories ". . . expressed in behavioristic terms . . ." These inventories enabled the gathering of job activity data from enlisted job incumbents, and data relating to task sharing and delegation from officers of the Medical, Nurse and Dental Corps. A data management sub-system was devised to process incumbent data, then carry out needed analyses. The development of initial competency curricula based upon job analysis was implemented to a level of methodology determination. These methods and curriculum materials constituted a third (instructional) sub-system.

Thus, as originally proposed, a system capability has been developed in fulfillment of expressed needs. The system, however, remains untested and unevaluated. ADO 43-03X called for feasibility test and cost-effectiveness determination. The project was designed to so comply. Test and evaluation through the process of implementation has not proved feasible in the Navy Medical Department within the duration of the project. As designed and developed the system does have "... precise goals and defined operational interrelation among instructional system components." The latter has been achieved in terms of a recommended career structure affording productive, rewarding manpower utilization which bridges manpower training and health care delivery functions.

Data Management Sub-System

Job analysis, involving the application of comprehensive task inventories to thousands of job incumbents, generates many millions of discrete bits of response data. They can be processed and manipulated only by high speed computer capability using rigorously designed specialty programs. In addition to numerical data base handling, there is the problem of rapidly and accurately manipulating a task statement data base exceeding ten thousand carefully phrased behavioral statements. Through the use of special programs, task inventories are prepared, printouts for special purposes are created following a job analysis application, access and retrieval of both data and tasks are efficiently and accurately carried out, and special data analyses conducted. The collective programs, techniques and procedures comprising this sub-system are referred to as the Navy Occupational Data Analysis Language (NODAL).

Job Analysis Sub-System

Some twenty task inventory booklets (and associated) response booklets) were the instruments used to obtain job incumbent response data for more than fifty occupations. An inventory booklet contains instructions, formatted questions concerning respondent information ("bio-data"), response dimension definitions, and a list of tasks which may vary in number from a few hundred to more than a thousand per occupational field.

By applying NODAL and its associated indexing techniques, it is possible to assemble modified or completely different inventories than those used in this research. Present inventories were applied about three years ago. While they have been rendered in operational format, they should not be reapplied until their task content is updated.

Response booklets were designed in OPSCAN mode for ease of recording and processing responses.

Overall job analysis objectives and a plan of administration were established prior to inventory preparation, including the setting of provisional sample target sizes. Since overall data attrition was forecast to approximate twenty percent, final sample and sub-sample sizes were adjusted accordingly. Stratified random sampling techniques were used. Variables selected (such as rating, NEC, environment) determined stratifications, together with sub-population sizes. About fifteen percent of large sub-populations were sought while a majority of all members of small sub-populations were sought.

Administration procedures were established with great care for every step of the data collecting process, and were coordinated with sampling and data analysis plans. Once set, the procedures were formalized as a protocol and followed rigorously.

Instructional Sub-System

Partial "competency curricula" have been composed as an integral sub-system bridging what is required as performance on the job with what is, accordingly, necessary instruction in the training process. Further, curriculum materials were developed to meet essential requirements for implementing the system so that the system could be tested and evaluated for cost effectiveness. However, due to the fact that test and evaluation was not feasible in the Navy Medical Department within the duration of the project, it was not possible to complete the development of the system through the test and evaluation phase. The inability to complete this phase also interrupted the planned process for fully developing the curricula; therefore, instead of completed curricula ready for use in the system, the curricula were partially developed to establish the necessary sub-system methodology. competency curricula are based on tasks currently performed by job incumbents in 1971. (The currency of a given curriculum depends upon periodic analysis of incumbents' jobs, and its quality control resides in the evaluation of the performance competency of the program's graduates.)

A competency curriculum provides a planned course of instruction or training program made up of sequenced competency units which are, in turn, comprised of sequenced modules. These modules, emphasizing performance objectives, are the foundation of the curriculum.

A complete module would be comprised of seven parts: a cluster of related tasks; a performance objective; a list of knowledges and skills implied by the objective; a list of instructional strategies for presenting the knowledges and skills to the learner; an inventory of training aids for supporting the instructional strategies; a list of examination modes; and a statement of the required training time. In this project, curriculum materials have been developed to various levels of adequacy, and usually comprise only the first three parts; the latter four need to be prepared by the user.

The performance objective, which is the most crucial part of the module, is the basis for determining curriculum content. It is composed of five essential elements: the stimulus which initiates the behavior; the behavior; the conditions under which the behavior takes place; the criteria for evaluating the behavior; and the consequence or results of the behavior. A sixth element, namely next action, is not essential; however, it is intended to provide linkage for the next behavior.

Knowledges and skills listed in the module are those needed by the learner for meeting the requirements of the performance objective.

Instructional strategies, training aids, examination modes and training time have been specified only for the Basic Hospital Corps Curriculum. The strategies, aids and modes were selected on the basis of those considered to be most supportive in presenting the knowledges and skills so as to provide optimum learning effectiveness and training efficiency. The strategies extend from the classroom lecture as traditionally presented by a teacher to the more sophisticated mediated program for self-instruction. The training aids, like strategies, extend from the traditional references and handout material in the form of a student syllabus to mediated programs for selfinstruction supported by anatomical models. Examination modes extend from the traditional paper and pencil tests to proficiency evaluation of program graduates on the job, commonly known as feedback. Feedback is essential for determining learning effectiveness and for quality control of a training program. The kind of instructional strategies, training aids and examination modes utilized for training are limited only by such factors as staff capability and training budget.

The training time specified in the Basic Hospital Corps Curriculum is estimated, based upon essential knowledge and skills and program sequence.

The competency curriculum module, when complete, provides all of the requirements for training a learner to perform the tasks set forth in the module. A module may be used independently or related modules may be re-sequenced into modified competency units to provide training for a specific job segment.

Since the curricula are based upon tasks performed by job incumbents in 1971, current analysis of jobs needs to be accomplished using task inventories that have been updated to reflect changes in performed tasks. Subsequent to job analysis, a revision of the curricula should be accomplished to reflect task changes. When the foregoing are accomplished, then faculty and other staff members may be indoctrinated to the competency curricula and to their relationship to the education and training system.

In addition to the primary use for the systematic training of job incumbents, these curricula may be used to plan for new training programs, develop new curricula, and revise existing curricula; develop or modify performance standards; develop or modify proficiency examinations; define billets; credentialize training programs; counsel on careers; select students; and identify and select faculty.

The System

Three sub-systems, as described, comprise the proposed system for Education and Training Programs in the Navy Medical Department. This exploratory and advanced developmental research has established an overall methodology for improved education and training incorporating every possible means of providing bases for demonstrating feasibility and cost effectiveness. There remains only job analysis sub-system up-dating, instructional sub-system completion, and full system test and evaluation.

Acknowledgements

The authors wish to acknowledge the invaluable participation of the several thousands of Naval personnel who served as respondents in inventory application. The many military and civilian personnel who contributed to developmental efforts are cited by name in the Final Report.

The authors also wish to acknowledge former colleagues for singularly important contributions, namely, Elias H. Porter, Ph.D., Carole K. Kauffman, R.N., M.P.H., Mary Kay Munday, B.S.N., R.N., Gail Zarren, M.S.W., and Renee Schick, B.A.

Identity and acknowledgement of the project Advisory Group during the project's final year is recorded in the Final Report.

Lastly, the project could not have been commenced nor carried out without the vision, guidance and outstanding direction of Ouida C. Upchurch, Capt., NC, USN, Project Manager.

NAVY MEDICAL DEPARTMENT

TASK INVENTORY BOOKLET

OPHTHALMOLOGY

(HOSPITAL CORPS)

CONSTRAINTS AND ETHICAL USE

This task inventory was developed three years ago in a first-version key punch format for education and training research purposes.

The present "operational" format, using a mark-sense response booklet (Opscan), is recommended for future applications. The task and equipment statements comprising the bulk of the inventory are precisely the same (less duplicate entries) as in the original research tools but rearranged for Opscan mode. Biographical data questions have also been reformatted for Opscan (NEC codes should be updated).

The processing, administering and formatting of this inventory have thus been readied for operational application.

It is strongly recommended that this inventory be updated in its task and equipment statement sections before actual operational use. These reasons pertain:

- Changes in medical or related procedures or techniques
- Some tasks may violate current policy or be obsolete
- *Equipment changes may have occurred
- The objective of task comprehensiveness may change
- •Objectives may shift to embrace manpower utilization as well as education and training

In the latter regard, the present operational format includes a "time to perform" dimension (as well as frequency of performance and two additional optional blank response dimension fields). As a response dimension, "time to perform" has been validated within the context of inventories for professional personnel where the objectives embraced utilization (i.e., time associated with shared and delegable tasks). The original Enlisted inventory content was directed to education and training factors only. If "time to perform" is to be used operationally, each task and equipment statement should be examined by expert job incumbents to remove possible overlaps which could confound "time to perform" data. This review process would also serve other purposes cited above.

A general precaution is in order.

When task analysis inventories are poorly prepared, loosely administered, administered according to less than rigorous sampling, or are handled casually in processing or interpretation, they will inevitably produce poor or questionable data, at best. At worst, such practices will result in loss of money and time, and produce dangerous data. Inventories should be prepared, applied, processed and interpreted only by knowledgeable professional and technical personnel. As in the cases of ethically controlled behavior tests, inventories should not be casually copied or distributed, and should remain under the control of authorized, trained personnel. Factors effecting reliability and validity should be fully appreciated.

GENERAL INSTRUCTIONS

There are two parts to be completed for this survey:

Part I Career Background Information (answers to be recorded in this TASK BOOKLET)

Part II A List of Tasks (answers to be recorded on the accompanying RESPONSE BOOKLET)

B List of Instruments and Equipment (answers to be recorded on the accompanying RESPONSE BOOKLET)

Each part is preceded by a set of instructions. Be sure to read them carefully before you start answering each part. All instructions are found on the tinted pages.

PLEASE USE ONLY NUMBER 2 LEAD PENCILS. ERASE ALL CHANGES CAREFULLY AND COMPLETELY. DO NOT PUT ANY MARKS OTHER THAN YOUR ANSWERS ON EACH RESPONSE PAGE.

DO NOT FOLD, WRINKLE, CREASE OR DETACH PAGES FROM EITHER TASK BOOKLET OR RESPONSE BOOKLET.

WHEN RECORDING YOUR ANSWERS YOU MAY WANT TO USE A RULER TO READ ACROSS ANSWER AND QUESTION COLUMNS.

WHEN YOU HAVE COMPLETED YOUR RESPONSES, PUT THE TASK INVENTORY BOOKLET AND THE RESPONSE BOOKLET IN THE ENCLOSED SELF-ADDRESSED ENVELOPE. SEAL AND RETURN TO THE OFFICER WHO GAVE YOU THIS PACKAGE. COMPLETED BOOKLETS SHOULD BE RETURNED WITHIN ONE WEEK OF RECEIPT.

	DO NOT	FILL IN	
Part I			(1)
CAREER BACKGROUND INFORMATION			(7)
Check that the Form and Serial Number in this book match those on the cover of this Booklet	Form	Serial No.	(7)
Name of your Duty Station			
City & State (if applicable)			
Your Name			
Social Security Number			(14)
PLEASE ANSWER QUESTIONS BELOW BY ENTERING THE NUMBER IN THE BLANKS PROVIDED. TWO BLANKS REQ TWO-DIGIT ANSWER. DISREGARD NUMBERS IN PARENT	UIRE A	ENTER ANSWERS HERE	
Ql. Select the number to indicate the Corps t which you belong:	0	Q1	(23)
 Dental Technician Hospital Corps 			
Q2. Indicate your military status:		Q2	(24)
1. USN 2. USNR			
Q3. Indicate your pay grade:		Q3	(25)
1. E1 6. E6 2. E2 7. E7 3. E3 8. E8 4. E4 9. E9 5. E5			
Q4. Indicate your total years of active duty the Navy to date: (estimate to the neares		Q4	(26)
 Less than 2 years 2 to 4 years 5 to 8 years More than 8 years 			

		ENTER ANSWERS HERE	
Q5.	Select the number to indicate your present immediate supervisor:	Q5	(27)
	 Physician Dentist Nurse MSC Officer HM or DT Other (Specify) 		
Q6.	Select the number to indicate the average number of hours you work per week: (estimate to the nearest hour)	Q6	(28)
	 35 to 40 hours 41 to 50 hours More than 50 hours 		
Q7.	Please give an estimate of the percent of time you spend on the following (write five percent as 05):	Q7.	
	 Inpatient care Outpatient care Teaching Administration Other (specify) 	1% 2% 3% 4% 5%	(29) (31) (33) (35) (37)
Q8.	Assuming that most or all of the following factors are of importance to you, select the three which, if improved, would contribute most to your job satisfaction:	Q8	(39) (41) (43)
	Ol Salary and/or promotion opportunities Oliminate Retirement benefits Oliminate Housing Oliminate Educational advancement opportunities Oliminate Stability of tour of duty Oliminate Physical facilities and equipment Oliminate Administrative and clerical support Oliminate Work load Oliminate Personal career planning Opportunity to attend professional meetings		(43)

		ANSWERS HERE	
Q9.	Using the list on page <u>vii</u> specify your current NEC by writing the <u>last two digits</u> of the CODE.	Q9	(45)
Q10.	Select the number to indicate your years of experience corresponding to the NEC stated in Q9: (estimate to the nearest year)	Q10	(47)
	1. Less than 1 year 4. 6 to 10 years 2. 1 to 2 years 5. 11 to 15 years 3. 3 to 5 years 6. More than 15 years		
Q11.	If you have other NEC(s) in addition to the one specified in Q9, check page vii and indicate the last two digits of the CODE(s). If you have none, enter "99" in answer space for Q11 and Q12.	Q11a b	(48) (50)
Q12.	Select the number to indicate the years of experience you had in the NEC(s) stated in Qll (estimate to the nearest year).	Q12a b	(52) (53)
	1. Less than 1 year 4. 6 to 10 years 2. 1 to 2 years 5. 11 to 15 years 3. 3 to 5 years 6. More than 15 years		
Q13.	From the list below, write the two-digit CODE to indicate the specialty of the department in which you are currently functioning.	Q13	(54)
	CODE Ol Administration Ol Education Ol Education Ol Education Ol Education Ol Coronary Care Ol Dermatology Ol Medicine - OPD Ol Medicine - Wards Ol Obstetrics/Gynecology Olimpia Orthopedics Olimpia Orthopedics Olimpia Orthopedics Pediatrics Psychiatry Public Health Radiology General Surgery-Wards		

v

				ENTER A NSWE R HERE	
Q14.	of wor	duty station a	to indicate the type t which you currently en working for at	Q14	(56)
	3. 4. 5. 6. 7. 8.	Aboard ship/s	e Commands ands or PMUs		
Q15.		icate the numb mally supervis	er of people you se:	Q15	(57)
	1.	3-5	3. 6-10 4. 11-20 5. over 20		
			l		

MEDICAL/DENTAL NEC (MAYAL ENLISTED CODE) AND TITLE

General Service, Hospital or Dental Corpsman 3371 Health Physics & Process Control Technician 3391 Nuclear Power Plant Operator 8402 Nuclear Submarine Medicine Technician 8403 Submarine Medicine Technician 8404 Medical Field Service Technician 8405 Advanced Hospital Corps Technician (Class B) 8406 Aviation Medicine Technician 8407 Nuclear Medicine Technician 8408 Cardiopulmonary Technician 8409 Aviation Physiology Technician 8412 Clinical Laboratory Assistant Technician 8413 Tissue Culture Technician 8414 Clinical Chemistry Technician 8415 Medical Technology Technician 8416 Radioactive Isotope Technician 8417 Clinical Laboratory Technician 8432 Preventive Medicine Technician 8433 Tissue Culture and Tissue Bank Technician 8442 Medical Administrative Technician 8452 X-ray Technician 8453 Electrocardiograph/Basal Metabolism Technician 8454 Electroencephalograph Technician 8462 Optician (General) Technician 8463 Optician Technician 8466 Physical and Occupational Technician 8472 Medical Photography Technician 8482 Pharmacy Technician 8483 Operating Room Technician 8484 Eye, Ear, Nose, & Throat Technician 8485 Neuropsychiatry Technician 8486 Urological Technician 8487 Occupational Therapy Technician 8488 Orthopedic Appliance Mechanic 8489 Orthopedic Cast Room Technician 8492 Special Operations Technician 8403 Medical Deep Sea Diving Technician 8494 Physical Therapy Technician 8495 Dermatology Technician 8496 Hobalming Technician 8497 Medical Illustration Technician 8498 Medical Equipment Repair Technician 8703 DT General, Advanced 8707 DT Field Service 8713 DT Clinical Laboratory 8714 DF Research Assistant 8722 Dr Administrative 8732 DT Repair 8752 DT Prosthetic, Basic 8753 DT Prosthetic, Advanced

DT Maxillofacial Prosthetic

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RESPONSE BOOKLET INSTRUCTIONS

- To complete Part II, you need this TASK BOOKLET and the accompanying RESPONSE BOOKLET. Record all your answers to Part II in the RESPONSE BOOKLET.
- All pages of the RESPONSE BOOKLET are machine readable. In order for responses to be properly read, please be sure to:
 - 1. Use a No. 2 pencil only
 - 2. Carefully and completely shade the number corresponding to your answer under each column.
- Complete Page 00 of the RESPONSE BOOKLET first. Follow instructions given on the page. Fill in Line 1, and Boxes 2, 3, 4, and 5. Ignore all other boxes. BE SURE TO ENTER YOUR SOCIAL SECURITY NUMBER (WRITE DOWNWARD) IN THE BLANK SPACES IN BOX 3: then darkly shade the corresponding number on each line. An example of a completed Page 00 is shown on the next page (the handwritten notes in this example are for clarification only. Please do not make similar notes on your RESPONSE BOOKLET.)
- After completing Page 00, carefully read and follow instructions given on pages x through xiv.
- PLEASE HANDLE YOUR RESPONSE BOOKLET CAREFULLY. KEEP IT CLEAN AND AWAY FROM CHEMICALS. DO NOT DETACH, FOLD, WRINKLE OR CROSS OUT ANY PAGE.

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PART II

PART II A LIST OF TASKS

PART II B LIST OF INSTRUMENTS AND EQUIPMENT

HOW TO RESPOND TO TASK STATEMENTS AND INSTRUMENTS

Your responses to each statement should be marked on the corresponding page, column and item number in your RESPONSE BOOKLET.

Note that each page in your RESPONSE BOOKLET has two response blocks. The left-hand block (items 1-25) is for entering responses to statements printed on LEFT pages of this TASK BOOKLET; the right-hand block (items 26-50) is for the responses to statements printed on RIGHT pages. Make sure that your answers are recorded in the appropriate block on every page. DO NOT MAKE ANY MARKS OTHER THAN YOUR ANSWERS!

Each time you start a new page in your RESPONSE BOOKLET, check the page on your TASK BOOKLET. See that the numbers match; then mark the page number in "Box X" in the response page (see instructions at the top of response page.) This is necessary for computer processing.

Tear the Response Guide (p. xiii) at the perforation, and use the correct side to respond to each task or instrument found on the following white pages. Note the following detailed explanation of responses. Column A - (the responses to Column A differ for Part II A and Part II B, be sure to use the appropriate set of responses.)

Part II A

How often did you do this task within the last month? (If you were on leave, consider your immediate past working month.)

- 0 = Did not do
- 1 = Did less than 5 times
- 2 = Did 5 to 20 times
- 3 = Did 21 to 50 times
- 4 = Did 51 to 100 times
- 5 = Did more than 100 times

Part II B

How often did you use this instrument or piece of equipment within the last month? (If you were on leave, consider your immediate past working month.)

- 0 = Did not use
- 1 = Used less than 5 times
- 2 = Used 5-20 times
- 3 = Used 21-50 times
- 4 = Used 51-100 times
- 5 =Used more than 100 times

If answer in Column A is 0, go to the next statement. If answer is 1, 2, 3, 4 or 5, answer also Columns B, C & D.

Column B

Indicate the approximate time you spent on a <u>single</u> performance the last time you performed this task.

- 0 = less than one minute
- 1 = 1 to 4 minutes
- 2 = 5 to 10 minutes
- 3 = 11 to 20 minutes
- 4 = 21 to 30 minutes
- 5 = 31 to 60 minutes
- 6 = 1 to 2 hours
- 7 = more than 2 hours

Column C

Do you feel you need additional training to perform this task?

- 0 = No
- 1 = Yes

Column A - (the responses to Column A differ for Part II A and Part II B, be sure to use the appropriate set of responses.)

Part II A

How often did you do this task within the last month? (If you were on leave, consider your immediate past working month.)

- 0 = Did not do
- 1 = Did less than 5 times
- 2 = Did 5 to 20 times
- 3 = Did 21 to 50 times
- 4 = Did 51 to 100 times
- 5 = Did more than 100 times

Part II B

How often did you use this instrument or piece of equipment within the last month? (If you were on leave, consider your immediate past working month.)

- 0 = Did not use
- 1 = Used less than 5 times
- 2 = Used 5-20 times
- 3 = Used 21-50 times
- 4 = Used 51-100 times
- 5 = Used more than 100 times

If answer in Column A is 0, go to the next statement. If answer is 1, 2, 3, 4 or 5, answer also Columns B, C & D.

Column B

Indicate the approximate time you spent on a <u>single</u> performance the last time you performed this task.

- 0 = less than one minute
- 1 = 1 to 4 minutes
- 2 = 5 to 10 minutes
- 3 = 11 to 20 minutes
- 4 = 21 to 30 minutes
- 5 = 31 to 60 minutes
- 6 = 1 to 2 hours
- 7 = more than 2 hours

Column C

Do you feel you need additional training to perform this task?

- 0 = No
- 1 = Yes

RESPONSE GUIDE

; i, (DO NOT LOSE THIS TAB)

HOW TO RESPOND TO PART IIA - LIST OF TASKS

IF A = 1-5, ANSWER COLUMNS B, C & D ALSO. IF A = 0, GO TO NEXT STATEMENT: ANSWER COL. A FIRST.

(Additional instructions will be given if this
column is used) OPTION Ω TRAINING TO PER-FORM THIS TASK? NEED ADDITIONAL DO YOU FEEL YOU ပ (single performance TIME CONSUMED the last time performed) FREQUENCY

0=DID NOT DO LAST MONTH
1=DID LESS THAN 5 TIMES
2=DID 5 TO 20 TIMES
3=DID 21 TO 50 TIMES
4=DID 51 TO 100 TIMES
5=DID MORE THAN 100 TIMES
5=DID MORE THAN 100 TIMES
7=MORE THAN 2 HOURS

0=NO

RESPONSE GUIDE

(DO NOT LOSE THIS TAB)

HOW TO RESPOND TO PART IIB - LIST OF INSTRUMENTS AND EQUIPMENT

IF A = 1-5, ANSWER COLUMNS B, C & D ALSO. IF A = 0, GO TO NEXT STATEMENT: ANSWER COL. A FIRST.

TIME CONSUMED

DO YOU FEEL YOU

ပ

OPTION

Ω

FREQUENCY

TRAINING TO PER-NEED ADDITIONAL (last time used)

(Additional instructions will be given if this
column is used)

FORM THIS TASK?

1=YES 0=N0

1=USED LESS THAN 5 TIMES 2=USED 5 TO 20 TIMES 0=DID NOT USE LAST MONTH

O=LESS THAN 1 MINUTE 2=5 TO 10 MINUTES 1=1 TO 4 MINUTES

3=11 TO 20 MINUTES 5=31 TO 60 MINUTES 4=21 TO 30 MINUTES

3=USED 21 TO 50 TIMES 4=USED 51 TO 100 TIMES 5=USED MORE THAN 100 TIMES

6=1 TO 2 HOURS

7=MORE THAN 2 HOURS

B: 47 B

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II.

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xiv

Part II A
LIST OF TASKS

LEFT PAGE	DI CHATH (HOSP CORPS) TASK BOCKLET
	1 ENTER RESPONSES TO STATEMENTS BELOW IN LIEFT SIDE OF PAGE OF
	1 OF RESPONSE BOOKLET
	PECEIVE PATIENTS ON ARRIVAL, I.E. INTRODUCE SELF, DATAIN PATIENT'S NAME
	TEXPLAIN SCHEDULES TO PATIENTS/FAMILIES, I.E., TIME TO AND FROM O.P., APPOINTMENTS
3	INSTRUCT OR HELP PATIENT/FAMILY FILL OUT FORMS
	VERIFY IDENTIFICATION OF PATIENT, E.G. FOR TREATMENT, MEDICATIONS, EXAMINATION
5	PEMOVE/SECURE/RETURN PATIENTS PERSONAL EFFECTS
	TOBTAIN PRELIMINARY MEDICAL HISTORY, I.E. PAST/PRESENT COMPLAINTS, ALLERGIES, MEDICATIONS
7	OBTAIN PATIENT'S SOCIAL AND FAMILY HISTORY
8	I ASSIST PATIENTS IN/OUT OF BED, EXAM OR O.R. TABLES !
9	ACCOMPANY PATIENT TO OTHER DEPARTMENTS/CLINICS
10	I TRANSPORT NON AMBULATORY PATIENT TO OTHER DEPARTMENTS/CLINICS
11	 LOAD/UNLOAD PATIENTS FROM STRETCHERS (GURNEY)
12	POSTION/HOLD PATIENT FOR EXAMINATION, TREATMENT, SURGERY
13	MOVE/POSITION COMATOSE/ANESTHETIZED PATIENT
14	STIMULATE/AROUSE PATIENT AFTER ANESTHESIA
15	MOVE/POSITION PATIENT WITH HEAD INJURIES
16	DRAPE/GOWN PATIENT FOR EXAMINATION/TREATMENT
17	IDRAPE/UNDRAPE PATIENT FOR SURGERY
18	CLEAN AND CLOTHE PATIENTS AFTER SURGERY/TREATMENT/EXAMINATION
19	REASSURE/CALM PATIENT BEFORE SURGERY
20	REASSURE/CALM APPREHENSIVE (ANXIOUS) PATIENT
21	REASSURE APPREHENSIVE PARENTS OF PEDIATRIC PATIENT
22	REASSURE/CALM CHILDREN FOR EXAMINATION OR TREATMENT
23	RESTRAIN/CONTROL CHILDREN FOR EXAMINATION/TREATMENT/TEST
24	TEACH PATIENT MEDICATION STORAGE REQUIREMENTS, E.G. REFRIGERATION, EXPIRATION DATE
25	I INFORM PATIENT/FAMILY OF SYMPTOMS OF INTOLERANCE/OVERDOSE TO MEDICATION, E.G. BLEEDING GUMS, COMA

GO TO RIGHT HAND PAGE

RIGHT PAGE	OI OPHTH (HOSP CORPS) TASK BOCKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE OF OF RESPONSE BOOKLET
	TEXPLAIN/ANSWER PATIENT/FAMILY QUESTIONS ABOUT MEDICATIONS, E.G. PURPOSE, DOSE, SCHEDULE
27	I TANSHER PATIENT INQUIRIES REGARDING NONPRESCRIPTION DRUGS I
28	 EXPLAIN/ANSWER QUESTIONS ABOUT TREATMENT PROCEDURE VIA TELEPHONE
	I IINFORM PATIENT OF PROCEDURES REQUIRED PRIOR TO/DURING IEXAMINATION/TEST/TREATMENT
30	1 EXPLAIN/ANSWER PATIENT'S QUESTIONS REGARDING EXAMINATION/TEST/ TREATMENT PROCEDURES
	 TEACH PATIENT SELF-ADMINISTRATION OF MEDICATIONS (OTHER THAN INJECTIONS)
	I ITEACH PATIENT/FAMILY NURSING CARE PROCEDURES, E.G. DRESSING ICHANGE, CAST CARE
	1 IEXPLAIN/ANSWER QUESTIONS ABOUT DOCTOR'S INSTRUCTIONS TO PATIENT/ IFAMILY
34	 EXPLAIN/ANSWER PATIENT'S QUESTIONS REGARDING SYMPTOMS/DISEASE/ TREATMENT
35	I REINFORCE PATIENT'S POSITIVE RESPONSE TO THERAPY
36	
37	ASK PATIENT/CHECK CHART FOR CONTRAINDICATION FOR TREATMENT, IPROCEDURE, TEST
38	REVIEW WITH PATIENT PRINTED INSTRUCTIONS FOR EXAMINATION/THERAPY PROCEDURES
39	EXPLAIN MINOR SURGICAL PROCEDURE/OPERATION TO PATIENT/FAMILY
40	TEXPLAIN MAJOR SURGICAL PROCEDURE/OPERATION TO PATIENT/FAMILY
41	I INSTRUCT PATIENT ON CARE AND USE OF CONTACT LENSES
42	
43	ITAKE BLOOD PRESSURE
44	1 ICHECK RADIAL (WRIST) PULSE I
45	ICHECK PATIENTS TEMPERATURE
46	1 ICHECK/COUNT RESPIRATIONS I
47	ICHECK PATIENT FOR PROSTHESIS, E.G. EYE/TEETH/EXTREMITY
48	108SERVE/REPORT SYMPTOMS OF SIDE EFFECTS TO TREATMENT/MEDICATION

LEVALUATE PATIENT'S COMPLAINTS OR SYMPTOMS OF PAIN

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LEFT PAGE (DZ OPHTH (HOSP CORPS) TASK BOOKLET
I TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 02 OF RESPONSE BOOKLET
	SCREEN PATIENT ON ARRIVAL TO DETERMINE WHICH STAFF MEMBER
2	I CHECK PUPIL REACTION TO LIGHT
3	 DILATE PUPILS
4	 PALPATE EYF FOR INTRACCULAR TENSION
	 OBSERVE/RECORD OR DESCRIBE CHARACTERISTICS OF DRAINAGE FROM EYES/EARS
	 OBSERVE FOR REPORT OR DESCRIBE VISUAL DISTURBANCES, E.G. BLURRED, DOUBLE, MIRROR, TUNNEL
7	I IDD VISUAL ACUITY TEST USING SNELLEN CHART
8	 DO VISUAL ACUITY TEST USING AFVT MACHINE
9	DO TONGGRAPHY
10	 GRAPH TONOMETRY RESULTS AND CALCULATE INTRAOCULAR PRESSURE
11	I IDO COLOR VISION TEST I
12	I DO CENTRAL FIELD VISION TEST
13	I DO PERIPHERAL FIELD VISION TEST
14	 TEST FIELD OF VISION WITHOUT INSTRUMENT
15	t DO SCHIOTZ TONOMETRY
16	I IDO APPLANATION TONOMETRIES I
17	I DO DEPTH PERCEPTION TEST
18	 DO PRELIMINARY REFRACTIVE TESTS
19	DO MANIFEST REFRACTIONS
20	DO RED LENS TEST
21	MEASURE POINT OF CONVERGENCE USING PRINCE RULE
22	MEASURE PUPILLARY DISTANCE
23	TEST FOR OCULAR MUSCLE BALANCE (HETEROPHORIAS) BY INSTRUMENTATION
24	! TEST FOR RIGHT AND LEFT HYPERPHORIA
25	OBSERVE CARDINAL DIRECTION OF GAZE FOR OCULAR MUSCLE IMBALANCE

GO TO RIGHT HAND PAGE

	1 OF RESPONSE BOOKLET
26	TOBSERVE FOR OCULAR MUSCLE IMBALANCE USING COVER CP RED GLASS [(MADDOX ROD)]
27	ITEST PRISM CONVERGENCE/DIVERGENCE
28	! !TEST ACCOMODATION (VISUAL)
29	TEST FOR DIPLOPIA
30	HOLD FOCAL DBJECT FOR STRABISMUS EXAMINATION
31	DO SLIT LAMP EXAMINATION FOR FOREIGN BODIES
32	 DO SLIT LAMP EXAMINATION FOR CORNEAL ABERRATIONS
33	IDO ANISEIKONIA TEST
34	TAKE ELECTRORETINOGRAMS (ERG)
35	MAKE PRELIMINARY DIAGNOSIS OF CONJUNCTIVITIS
36	MAKE PRELIMINARY DIAGNOSIS OF IRITIS
37	IDBSERVE FOR/DESCRIBE HEARING DISTURBANCES, E.G. RINGING, HEAR ILOSS
38	TOBSERVE/RECORD OR DESCRIBE CHARACTERISTICS OF SPJTUM, MUCUS
39	EXAMINE FOR VIRAL INFECTIONS OF THE SKIN, E.G. JARTS
40	POINT OUT POSSIBLE ABNORMALITIES ON X-RAY FILM TO DOCTOR
41	ORDER NARCOTICS AND CONTROLLED DRUGS FROM THE PHARMACY
42	ORDER STOCK MEDICATIONS FROM PHARMACY
43	ORDER DRUGS LISTED IN FEDERAL SUPPLY CATALOGUE
44	MAKE LOCAL OPEN PURCHASES OF PHARMACEUTICALS
45	POUR/DRAW UP NARCOTICS AND CONTROLLED DRUGS
46	1 1POUR/DRAW UP MEDICATIONS OTHER THAN NARCOTICS AND CENTROLLED IDRUGS
47	MAKE ENTRIES INTO CONTROLLED DRUG/ALCOHOL LOG
48	TANSHER PERSONNEL INQUIRIES REGARDING MIXING/ADMINISTERING DRU
49	ANSWER INQUIRTES REGARDING DRUG REACTION

TASK NO.	1 ENTER RESPONSES TO STATEMENTS BELCH IN LEFT SIDE OF PAGE 03 1 OF RESPONSE BOOKLET
l	DISPOSE OF/RETURN MEDICATIONS/DRUGS WHOSE SHELF-LIFE HAS EXPIRED
2	DETERMINE WHETHER TO DESTROY OR TO RETURN PHARMACEUTICALS TO MANUFACTURER
3	DO AN INVENTORY OF DRUGS OTHER THAN NARCOTICS AND CONTROLLED DRUGS
4	ICLASSIFY AND STORE DRUGS
5	ICHECK DRUGS FOR VISIBLE CONTAMINATION/DETERIORATION, E.G. [CLOUDINESS, COLOR CHANGE
6	IDETERMINE EXPIRATION DATE OF LOCALLY COMPOUNDED PHARMACEUTICALS
7	NEGOTIATE WITH CIVILIAN SUPPLIERS REGARDING NEW DRUGS
8	READ/USE PHARMACEUTICAL MANUALS, FORMULARY, PDR
9	
10	CONVERT MEDICATION DOSAGE FROM CC TO MINIMS, GRAINS TO GRAM
11	ICONVERT COMMON WEIGHTS AND MEASURES FROM ONE SYSTEM TO ANOTHER, IE.G. CC TO TSP, LBS TO KG
12	ICONVERT SOLUTION CONCENTRATIONS FROM GM/MG % TO MEQ/L AND VICE IVERSA
13	COMPUTE AMOUNTS OF INGREDIENTS FOR COMPOUNDING/PREPARING PHARM ACCUTICALS
14	MAKE DILUTIONS OF MEDICINALS
15	IPREPARE LOCAL ANESTHETIC SOLUTIONS FOR USE
16	 PREPARE OPHTHALMIC SOLUTIONS
17	 IFILL PATIENT PRESCRIPTIONS
18	ISSUE FILLED PRESCRIPTIONS
19	ISSUE NON-PRESCRIPTION MEDICATIONS E.G. ASPIRIN
20	DETERMINE SIMILARITIES BETWEEN PHARMACEUTICAL TRADE NAMES AND GENERIC NAMES
21	ICHECK PRESCRIBED MEDICATIONS FOR INCOMPATIBILITIES OF LADMINISTRATION OR MIXING
22	NOTIFY DOCTOR OF ERRORS IN MEDICATION ORDERS
23	LABEL MEDICINE GLASSES WITH NAME AND AMOUNT OF DRUG FOR STERILE FIELD
24	APPLY TOPICAL MEDICATION TO MUCOSAL TISSUE, E.G. ORAL, EYE, ISTOMA
25	APPLY TOPICAL ANESTHESIA

RIGHT PAGE	03 OPHTH (HOSP COPPS) TASK BOOKLET
	FNTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 03 OF RESPONSE BOOKLET
26	ADMINISTER TISSUE INFILTRATION/LOCAL ANESTHESIA
27	I IADMINISTER MEDICATION BY SUBCUTANEOUS INJECTION !
28	I ADMINISTER INTRADERMAL INJECTION I
29	 ADMINISTER MEDICATION BY INTRAMUSCULAR INJECTION
30	 ADMINISTER MEDICATION TO EYE/EAR/NOSE
31	 TERMINATE INTRAVENOUS DYE FLOW AND REMOVE INJECTOR
32	 PRESCRIBE LOZENGES, THROAT GARGLES, EXPECTORANTS
33	 Check dressings, e.g. for cleanliness
34	 APPLY/CHANGE STERILE DRESSINGS
35	 GIVE PHISOHEX/BETADINE SCRUB TO PATIENTS
	I SHAVE AND SCRUB PATIENT FOR SURGERY OR DELIVERY OR TREATMENT OR LEXAMINATION
	PREPARE SKIN SITE WITH ANTISEPTIC SOLUTION PRIOR TO INCISION/ SUTURING/TREATMENT OR EXAMINATION
	I IGROUND PATIENT, E.G. FOR ELECTRICAL CAUTERIZATION, IDEFIBRILLATON, EKG
39	I POSITION/HOLD RETRACTORS TO MAINTAIN OPEN INCISION
40	1 TREMOVE FLUID FROM SURGICAL SITE WITH SPONGES OR SUCTION 1
41	
42	I IREMOVE SUTURES I
43	 CUT SUTURES AT SURGICAL SITE
44	 TIE SUTURES/LIGATURES FOR HEMOSTASIS
45	I ISUTURE SKIN I
46	 SUTURE MUSCLE
47	SUTURE SUBCUTANEOUS TISSUE
48	I Suture mucosal tissue
49	I ICUT TISSUE AS DIRECTED BY SURGEON
50	

LEFT PAGE 04 OPHTH (HOSP CORPS) TASK BOOKLET			
	I ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 04 I OF RESPONSE BOOKLET		
ı	ICLAMP BLOOD VESSELS		
2	 CONTROL MINOR BLEEDING, E.G. AFTER EXTRACTION OR INCISION 		
3	CAUTERIZE BLEEDERS WITH ELECTRIC CAUTERY (BOVIE)		
4	CONTROL BLEEDING BY PRESSURE DRESSING		
	I ICAUTERIZE BLEEDERS WITH CHEMICAL, E.G. SILVER NITRATE STICK. IPOWDER		
6	I ICLEAN WOUND, CUT, ABRASION I		
7	! !CHECK/EXAMINE INCISIONS/WOUNDS FOR PROGRESS OF HEALING !		
8	 REMOVE SUPERFICIAL FOREIGN BODY FROM TISSUE 		
9	 OBTAIN EQUIPMENT, MEDICATIONS, INSTRUMENTS P.R.N. FOR PERSONNEL PERFORMING STERILE PROCEDURE		
	OBTAIN PROSTHESIS FOR SURGICAL PROCEDURE, E.G. AORTIC GRAPH, PLATE, IMPLANT		
11	SET UP MAYO STAND WITH INSTRUMENTS		
12	I SET UP SURGICAL BACK TABLE WITH STERILE INSTRUMENTS/EQUIPMENT		
13	! !SET UP SUTURE BOOK/TOWEL !		
14	! !PREPARE SUTURE BOLSTERS !		
15	 CLEAN AND REPOSITION INSTRUMENTS DURING SURGICAL PROCEDURE 		
16	ADJUST SURGICAL INSTRUMENTS/EQUIPMENT DURING SURGICAL PROCEDURE		
17	 ADJUST SURGICAL SPOT LIGHT 		
18	 FLASH STERILIZE INSTRUMENTS 		
19	 COUNT NEEDLES/INSTRUMENTS PRE/POST SURGERY		
20	COUNT SPONGES DURING/AFTER SURGICAL PROCEDURE		
21	ICOLLECT, COUNT AND LAYOUT USED SPONGES FOR CALCULATING BLOOD LOSS AND FOR SPONGE COUNT		
22			
23	PASS STERILE DRAPES TO SURGEON		
24			
25	I PASS STERILE MATERIALS, EQUIPMENT, MEDICATION, TO PERSONNEL PERFORMING STERILE PROCEDURE		

GO TO RIGHT HAND PAGE

RIGHT PAGE - 04 OPHTH (HOSP CORPS) TASK BOOKLET			
	ENTER RESPONSES TO STATEMENTS BE OF RESPONSE BOOKLET	ELDA IN RIGHT SIDE OF PAGE 04	
	PASS STERILE ACCESSORIES, EQUIPMENT, E.G. TUBING, CORD TO CIRCULATOR FOR CONNECTION		
27	PASS CONTAMINATED MATERIAL TO CIRCULATOR		
28	PASS SPECIMEN TO CIRCULATOR		
29	MAINTAIN DRY STERILE FIELD DURING SURGERY		
30	SCRUB FOR SURGERY/STERILE PROCEDURE		
31	GOWN FOR STERILE PROCEDURE		
32	GLOVE FOR STERILE PROCEDURE		
33	REPORT BREAK IN STERILE TECHNIQUE TO PERSONNEL		
34	GOWN AND GLOVE PERSONNEL FOR STERILE PROCEDURE		
35 I	TIE UP SURGICAL GOWN FOR SCRUBBED PERSONNEL		
36	REMOVE CONTAMINATED GLOVES FROM SURGICAL TEAM		
	HOLD VIALS/AMPULES OF DRUGS FOR USE AND DRUG VERIFICATION DURING STERILE PROCEDURE		
38	POUR STERILE SOLUTION, E.G. STERILE WATER, SALINE		
39	INCISION AND DRAINAGE	SCRUB	
40	INCISION AND DRAINAGE	CIRCULATE	
41	SKIN GRAFTS	SCRUB	
42	SKIN GRAFTS	CIRCULATE	
43	HOMO GRAFTS	SCRUB	
44	HOMO GRAFTS	CIRCULATE	
45	SCAR REVISIONS	SCRUB	
46	SCAR REVISIONS	CIRCULATE	
47	BLEPMAROPLASTY	SCRUB	
48	 Blepharoplasty 	CERCULATE	
49	ENUCLEATION	SCRUB	
50	ENUCLEAT ION	CIRCULATE	

LEFT PAGE	05 OPHTH (HOSP CORPS) TASK BOOKLET	
	1 ENTER RESPONSES TO STATEMENTS BELOW IN LE 1 OF RESPONSE BOUKLET	EFT SIDE OF PAGE 05
1	EXCISION OF PTERYGIUM	SCRUB
2	EXCISION OF PTERYGIUM	CIRCULATE
3	I ICORNEAL TRANSPLANT I	SCRUB
4	I ICORNEAL TRANSPLANT I	CIRCULATE
5	I REPAIR OF STRABISMUS	SCRUB
6	 REPAIR OF STRABISMUS 	CIRCULATE
7	 REPAIR OF RETINAL DETACHMENT 	SCRUB
8	{ REPAIR OF RETINAL DETACHMENT 	CIRCULATE
9	 DISCISSION/NEEDLING OF CATARACT 	SCRUB
10	 DISCISSION/NEEDLING OF CATARACT 	CIRCULATE
11	 	SCRUB
12	 REM3VAL OF CATARACT, INTRACAPSULAR 	CIRCULATE
13	 EXCISION OF CHALAZION 	SCRUB
14	 EXCISION OF CHALAZION 	CIRCULATE
15	Í I CR YOC YCLOD I A THERMY I	SCRUB
16	 CRYOCYCLODIATHERMY 	CIRCULATE
17	į CRYDPEXY (PHOTO OR CRYOCOAGULATION) 	SCRUB
18	 CRYOPEXY (PHOTO OR CRYDCOAGULATION) 	CIRCULATE
19	ILASER EYE SURGERY	SCRUB
20	 	CIRCULATE
21	 	SCRUB
22	 	CIRCULATE
23	EXCISION OF BASAL CEL'S OF LID	SCRUB
24	EXCISION OF BASAL CELLS OF LID	CIRCULATE
25	REPAIR OF BLOW OUT FRACTURE OF EYE ORBIT	SCRUB
	i	

GO TO RIGHT HAND PAGE

	ENTER RESPONSES TO STATEMENTS BELOW IN RI OF RESPONSE BOOKLET	GHT SIDE OF PAGE 05
	REPAIR OF BLOW OUT FRACTURE OF EYE OPBIT	CIRCULATE
21	I IPLASTIC REPAIR OF EYELID, E.G. COSMETIC I	SCRUR
28	 PLASTIC REPAIR OF EYELID, E.G. COSMETIC 	CIRCULATE
29	 NASD-LACRIMAL DUCT PROBING 	SCRUE
30	 NASO-LACRIMAL DUCT PROBING 	CERCULATE
31	! EYE EXAM UNDER ANESTHESIA 	SCPUB
32	I EYE EXAM UNDER ANESTHESIA 	CIRCULATE
33	 REMOVAL OF CORNEAL FOREIGN BODY 	SCRUB
34	 PEMOVAL OF CORNEAL FOREIGN BODY 	CIRCULATE
35	 REMOVAL OF INNER OCULAR FOREIGN BODY 	SCQUB
36	 REMOVAL OF INNER OCULAR FOREIGN BODY 	CIRCULATE
37	 REPAIR DF PROLAPSED IRIS 	SCRUB
38	 REPAIR OF PROLAPSED IRIS 	CIRCULATE
39	 GLAUCOMA FILTERIZATION, E.G. SCHEIE 	SCRUB
40	1 GLAUCOMA FILTERIZATION, E.G. SCHETE 	CIRCULATE
41	 DACRYOCYSTORRHINDSTOMY 	SCRUB
42	 DACRYOCYSTOPRHINGSTOMY 	CIRCULATE
43	 CATARAST ASPIRATION 	SCRUB
44	 CATARACT ASPIRATION 	CIRCULATE
45	I I GON LO TOMY I	SCRUB
46	 GONIOTOMY 	CIRCULATE
47	 EVISCERATION 	SCRUB
48	Î FEVISCERATION Î	CIRCULATE
49	 REPAIR OF CORNEAL LACERATION 	SCRUB
50	I IREPAIR OF CORNEAL LACERATION I	CIRCULATE

LEFT PAGE	DS OPHTH (HOSP CORPS) TASK BOOKLET	
	LENTER RESPONSES TO STATEMENTS BELOW IN LEFT OF RESPONSE BOOKLET	SIDE OF PAGE 05
1	INTOECTOMY	SCRUB
2	 IRIDECTOMY 	CERCULATE
3	REPAIR OF SCLERAL LACERATION	SCRUB
4	REPAIR OF SCLERAL LACERATION	CIRCULATE
5	CYCLECTOMY	SCRUB
6	CYCLECTOMY	CIRCULATE
7	PLASTIC REPAIR OF ENTROPION/ECTROPION	SCRU3
8	PLASTIC REPAIR OF ENTROPION/ECTROPION	CIRCULATE
9	EXCISIONAL BIOPSY OF CONJUNCTIVAL TUMOR	SCRUB
10	EXCISIONAL BIOPSY OF CONJUNCTIVAL TUMOR	CIRCULATE
11	VITREOUS TRANSPLANT	SCRUB
12	VITREOUS TRANSPLANT	CIRCULATE
13	OPEN REDUCTION OF ZYGOMATIC ARCH	SCRUB
14	OPEN REDUCTION OF ZYGOMATIC ARCH	CIRCULATE
15	IRRIGATE EYES	
16	IRRIGATE LACRIMAL DUCTS	
17	REMOVE FOREIGN BODY FROM CONJUNCTIVAL SAC	
18	REMOVE EMBEDDED FOREIGN BODY FROM CORNEA	
19	PATCH EYES	
20	INSERT/REMOVE GLASS EYE/CONTACT LENSES	
	ASCERTAIN IF PATIENT HAS BEEN PREPPED FOR TE: PROCEDURE	ST/TREATMENT
22	PICK UP/DELIVER SPECIMENS	
23	LABEL/ACCESSION SPECIMEN CONTAINERS, E.G. TUI	BES, SLIDES
24	PREPARE, LABEL AND SEND CULTURE SPECIMENS TO	LABORATORY

PREPARE, LABEL AND SEND BIOPSY SPECIMENS TO LABORATORY

25

RIGHT PAGE	UC OPHITH (HUSP CORPS) TASK BUCKLET
	I ENTIR RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 36. I OF RESPONSE BOOKLET
26	TTAKE SKIN SCRAPE SPECIMEN FROM PATIENT
21	ITAKE WOUND SPECIMEN FROM PATIENT !
28	I ISCRAPE EYE ULCERS/CONJUNCTIVA FOR MICROBIOLOGICAL SPECIMENS I
29	I PREPARE SMEARS FOR MICROSCOPIC ANALYSIS !
30	I ISET UP AND MAINTAIN STAINING PROCEDURE !
- -	I FREAD EQUIPMENT MANUALS FOR OPERATION AND MAINTENANCE OF REQUIPMENT
32	INITIATE TREATMENT PROCEDURES IN THE ABSENCE OF A DOCTOR
33	I IDETERMINE NEED TO NOTIFY DOCTOR/NURSE OF PATIENT'S CONDITION I
34	 REFER PATIENT TO DOCTOR FOR TREATMENT
	I INFORM DOCTOR/NURSE OF PATIENT'S CONDITION, E.G. DESCRIPTION OF INJURY, SYMPTOMS, RESPONSE
36	ICARRY OUT DOCTOR'S VERBAL ORDERS
_	 CONSULT DOCTOR OR NURSE TO OBTAIN INFORMATION/ADVICE ON PATIENT CORE
38	I TREVIEW DOCTUR®S ORDERS AND INSTRUCTIONS WITH DOCTOR I
39	 ENSURE THAT DOCTOR®S ORDERS ARE CARRIED OUT
	I IMAKE SUGGESTION REGARDING PATIENT CARE, E.G. NEED OF MEDICATION, ITREATMENT
41	I IMAKE SUGGESTION REGARDING NEED FOR DIAGNOSTIC TESTS I
42	INITIATE AND ORDER DIAGNOSTIC TEST
	 REVIEW TEST/EXAMINATION/CONSULTATION REPORTS FOR ABNORMAL (POSITIVE) FINDINGS
44	I ICONFER WITH CORPSMAN TO DISCUSS PATIENT TREATMENT/PROGRESS/ IPROBLEM
	 CONDUCT TEAM/WARD CONFERENCE (CLASS) ON PROBLEM/PROGRESS OF INDIVIDUAL PATIENT
	I IVERIFY COMPLETENESS OF DOCTOR'S ORDERS, E.G. FOR ALL ROUTINE IADMISSION OR PRE-OP ORDERS
47	INRITE NURSING NOTES
48	 WRITE ORDERS IN PATIENT'S CHART FOR DOCTOR'S COUNTERSIGNATURE
49	 DETERMINE PRIORITIES FOR TREATMENT OF PATIENTS
50	I IREVIEW PAST AND PRESENT MEDICAL/DENTAL HISTORY TO PLAN CARE I

LEFT PAGE	OF OPHTH (HOSP CORPS) TASK BOOKLET
	FENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE OF FOR RESPONSE BOOKLET
1	ICLEAN AND DISINFECT WORKING AREA
2	 CLEAN/DISINFECT O.R. ROOM AFTER LAST CASE OF THE DAY
3	 CLEAN/DISINFECT O.R. FLOORS/FURNITURE AFTER FACH CASE
4	! ISET UP D.R. ROOM FOR SEPTIC CASE !
5	 CLEAN/DISINFECT O.R. ROOM AFTER SEPTIC CASE
6	I ICHANGE LINENS, E.G. BED, EXAM TABLES, BEDSIDE CURTAIN 1
7	 REVIEW AND EVALUATE ASEPTIC TECHNIQUES
8	 REVIEW AND EVALUATE BACTERIAL DECONTAMINATION PROCEDURES
	 WRITE STANDARD INSTRUCTIONS FOR PATIENT CONCERNING EXAMINATIONS/ THERAPY OR PROCEDURES
10	I ESTABLISH SURGERY SCHEDULE
	I INSPECT FOR AVAILABILITY AND USE OF SAFETY EQUIPMENT IN IHAZAROOUS AREAS
	INSPECT FOR USE OF PROTECTIVE CLOTHING IN OCCUPATIONALLY HAZARDOUS AREAS
13	CHECK EQUIPMENT FOR ELECTRICAL HAZARDS AND GROUNDS
14	I IDO PERÍODIC MECHANICAL SAFETY CHECKS ON POWER OPERATED EQUIPMENT !
15	 CHECK INSTRUMENTS AND SUPPLIES FOR STERILIZATION INDICATORS -
	I DISPOSE OF SUPPLIES/INSTRUMENTS/EQUIPMENT AFTER TIME LIMIT/ EXPIRATION DATE
17	INSPECT THAT SUPPLIES/MATERIALS/EQUIPMENT ARE STORED PROPERLY
18	INSPECT SUPPLIES/EQUIPMENT FOR ACCEPTABILITY/DAMAGE/LOSS/ PPILFERAGE
19	MAINTAIN STOCK OF STERILE SUPPLIES
20	PICK UP/DELIVER EQUIPMENT
21	STORE SUPPLIES
22	STORE INSTRUMENTS
23	JUNPACK EQUIPMENT
24	! !make up sterile trays !
25	I IMAKE SPECIAL SURGICAL SPONGES I

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No.

RIGHT PAGE (OZ (DEHTH (HMSP CHRPS) TASK POCKLET
	ENTER RESPONSES TO STATEMENTS RELOW IN PIGHT SIDE OF PAGE OF CE RESPONSE BOOKLET
26	COUNT SPONGES FOR O.P. PACKS
27	 SELECTIVET UP STAMBARD ENSTRUMENT TRAYS FOR SCHEDULEO SURGERY
29	 SELECTIBET UP INSTRUMENTS FOR SPECIAL SURGICAL PROCEDURE
29	SPLECT/SET UP INSTRUMENTS FOR SMALL PACKS
30 I	 ASSEMBLE/SELECT NEEDLES FOR NEEDLE BOOK
31	I IPREPARE AND STERILIZE LINEN I
32	 PACKAGE (WRAP/DATE/LABEL) STERILE SUPPLIES
33	 REPLENISH OPERATING ROOM WITH SUPPLIES
• .	 VERIFY/SIGN OFF ON REQUISITIONS/RECEIPTS FOR SUPPLIES/EQUIPMENT/
35	 VERIFY AND CO-SIGN INVENTORY
36	 Du supply/equipment inventory
37	ROTATE INVENTORY
38	 WASH GLASSWARE/INSTRUMENTS
39	 DISINFECT INSTRUMENTS/MATERIALS/EQUIPMENT
40	 DETERMINE METHOD OF STERILIZATION FOR INSTRUMENTS/EQUIPMENT
• -	 DETERMINE/SELECT AGENTS/PROCESSES FOR EQUIPMENT/INSTRUMENT STERILIZATION
42	 TEST AUTOCLAVE EFFECTIVENESS WITH CULTURE STRIPS
43	 BREAK DOWN SURGICAL INSTRUMENTS FOR POST OPERATIVE CLEANING
44	 ASSEMBLE PATIENT RECORDS FOR REVIEW BY DOCTOR
	I ICHECK CONSULTATION REQUESTS TO INSURE THE CORRECT STUDY IS TO BE ICARRIED OUT
· -	 SCHEDULE APPOINTMENTS FOR CLINIC/DEPARTMENT, E.G., MAINTAIN APPOINTMENT BOOK
• •	 MAINTAIN DAILY RECORDS ON PATIENT PROCEDURES/EXAMINATIONS PERFORMED
48	ASSIGN WORK TO PATIENTS
	I PREPARE REPORT/FEEDER REPORT ON NUMBERS OF INPATIENT/OUTPATIENT ISERVICES PERFORMED
50	

LEFT PAGE (DR DRHTH (HOSP CORPS) TASK BOCKLET
	FOR SESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE OB OF RESPONSE BOOKLET
1	ASSIGN PERSONNEL TO DUTIES/WORK ACCORDING TO SCHEDULE
2	 ANSWER TELEPHONE/TAKE MESSAGES, MEMOS
3	ASSIGN SPACE FOR EQUIPMENT AND SUPPLIES
4	ARRANGE FOR BRIEFINGS
5	CALCULATE LAB/DIAGNOSTIC TEST RESULTS
	 COORDINATE WITH OTHER SECTIONS FOR ASSISTANCE IN FABRICATING EQUIPMENT
7	LOCATE MISPLACED CHARTS/HEALTH RECORDS
	 LOG CHANGES/DELETIONS OF OPERATING PROCEDURES ON SLATE IN OPERATING ROOM
9	MAINTAIN TECHNIQUE CHARTS
10	 MAINTAIN DUTY/CALL/FMERGENCY RECALL POSTER
11	 ESTABLISH/MAINTAIN SUTURE/INSTRUMENT TRAY CARDS
12	I MAINTAIN ATTENDANCE RECORDS I
13	 PREPARE REQUISITIONS FOR DIAGNOSTIC PROCEDURES, E.G. LAB, EEG
14	 Prepare work orders/work requests
15	 CHECK PATIENTS CHART/HEALTH RECORD FOR COMPLETENESS OF FORMS/ REPORTS/RECORDS
16	 ORDER SUPPLIES/EQUIPMENT THROUGH FEDERAL SUPPLY SYSTEM
17	 PREPARE REQUEST FORM FOR PHOTOGRAPHIC/PRINTING SERVICES
18	ARRANGE FOR/FOLLOW UP COMPLETION OF CLINICAL LABORATORY TEST
19	 MAINTAIN INSTRUMENT CALIBRATION FILES
20	 CHECK/LOCATE/IDENTIFY PART NUMBERS FROM CATALOGUES/MANUALS
21	 LOG LOCAL PURCHASE INFORMATION
22	 MAKE LOCAL (OPEN) PURCHASE OF SUPPLIES
23	 PREPARE REQUISITIONS FOR SUPPLIES/EQUIPMENT
	 REQUISITION TRAINING AIDS FROM OTHER HOSPITALS/CLINICS OR CIVILIAN/GOVERNMENT HEALTH FACILITIES
25	I ILOG IN PATIENTS TO CLINIC/DEPARTMENT/SICK CALL

RIGHT PAGE	OB OPHTH (HOSP CORPS) TASK BOOKLET
_	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 08 OF RESPONSE BOOKLET
26	DETERMINE ADEQUACY OF STERILIZATION PROCECURES
27	 DEVELOP IMPROVED WURK METHODS AND PROCEDURES
28	 ASSESS COMPLETENESS OF LABORATORY REPORTS
29	 DETERMINE EQUIPMENT/SUPPLIES FOR EMERGENCIES/EXERCISES
30	! DETERMINE IF REPAIR IS WITHIN UNIT CAPABILITIES
	I TRESEARCH MATERIAL FOR PROJECTS, I.E. COMPILE STATISTICS, GATHER DATA FROM DIFFERENT SOURCES
32	 SUPERVISE ROUTINE EQUIPMENT MAINTENANCE FOR SECTION/UNIT
33	 ARRANGE FOR REPLACEMENT/REPAIR OF EQUIPMENT AS REQUIRED
	 CONFER/VISIT MANUFACTURERS/CONTRACTOPS TO OBTAIN FIRST HAND KNOWLEDGE OF EQUIPMENT/SUPPLIES
35	I CONSULT ON CENTRAL/LOCAL SUPPLY PROBLEMS/PROCEDURES
	 COORDINATE ON EQUIPMENT LOANS, BORPOWING OF MEDICAL/DENTAL SUPPLIES/TRAINING AIDS
= :	I ICOORDINATE WITH MANUFACTUPERS/CONTRACTORS FOR EQUIPMENT REPAIR/ IMAINTENANCE
38	! SUPERVISE/DIRECT UNITS*S OJT PROGRAM
39	 PLAN CONTENT FOR DJT PROGRAM
40	1 Ischedule lectures I
41	I IDESIGN TRAINING AIDS, ILLUSTRATIONS, GRAPHICS
	 SELECT CLINICAL MATERIAL FOR INSTRUCTIONAL PUPPOSES, E.G. PATIENTS, CASE STUDIES
43	1 EVALUATE/SELECT AUDIOVISUAL MATERIALS, E.G. FILYS
44	I ICONDUCT SEMINARS I
45	 PLAN CONFERENCES FOR STUDENTS DURING PRACTICAL TRAINING
46	I ITEACH FORMAL CLASSES I
47	I ICOMPUTE TEST GRADES
48	DEMONSTRATE CLINICAL PROCEDUPES USING PATIENT/SUBJECT
49	 SELECT WORK EXPERIENCES FOR STUDENT/TRAINEE
50	 EVALUATE STUDENTS PERFORMANCE/PROGRESS

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T	ASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE OF OF RESPONSE BOOKLET
	1	ICCORDINATE WITH SUPERVISORS/INSTRUCTORS ON STUDENT TRAINING
	2	1 IDESIGN SPECIAL RESEARCH EQUIPMENT/DEVICES
	3	
	4	1 IOPERATE/CONTROL EQUIPMENT FOR EXPERIMENTAL TESTS
	5	

Part II B
LIST OF INSTRUMENTS AND EQUIPMENT

LEFT PAGE	LO OPHTH (HOSP CORPS) TASK BYCKLET
	FENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 10. OF PESPONSE BOOKLET.
	TRAY, EYE IRRIGATION
2	LACRIMAL DUCT IRRIGATION TRAY
5	EYE DRESSING TRAY
4	 HARRINGTON FLOCKS SCREENER, FYE
5	I IPERIMÉTER, STANDARD I
6	 Tangent Screen
7	 SLIT LAMP FOR EYE TESTING
8	1 SLIT LAMP MICROSCOPE
9	 EYE FOREIGN BODY REMOVER, E.G., SPUD
10	 EYE CHART, ASTIGMATISM
11	 EYE CHART, DISTANCE AND NEAR
12	[DIATHERMY EQUIPMENT, OPHTHALMIC, E.G. MIRA
13	 PHOROMETER, OPHTHALMIC
14	 TRIAL LENS SET, OPHTHALMIC
15	 TRIAL FRAME SET, OPHTHALMIC
16	! !OPHTHALMOSCOPE !
17	! !retinoscope !
18	I IPHOROPTER I
19	I IPRINCE RULE I
20	SYNOPTOPHORE
21	AMBLYOSCOPE
22	TROPOSCOPE
23	
24	ICOLOR VISION ANALOSCOPE
25	IGOLDMAN STATIC PERIMETER

GO TO RIGHT HAND PAGE

PIGHT PAGE	10 OPHTH (HOSP CORPS) TASK BOOKLET
	I ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 10 I OF RESPONSE BOOKLET
26	GOLDMAN-WEEKERS DARK ADAPTOMETER
27	 STRUBOSCOPE
28	 COLOR VISION PLATES, E.G. PIP
29	 COLOR VISION LANTERNS, E.G. FARNSWORTH
30	AFVT MACHINE
31	PROJECTOR LAMP FOR SNELLEN CHARTS
32	ELECTRIC TONOGRAPH
33	TONOMETER
34	LENSOMETER
35	LIGHT INTENSITY METER 1
36	PHOTIC STIMULATOR UNIT I I
37	100-HUE COLOR VISION PHOTOCOAGULATOR
38	MADDOX ROD
39	 ERG (ELECTRORETINOGRAPH) MACHINE
40	FUNDUS CAMERA
41	ELECTRONYSTAGNOGRAPH MACHINE
42	 OBSERVATION AND OPERATING TELESCOPE
43	CRYD RETINA FRIGITRONIC
44	TINU TDARATAD CYND
45	CRYO GLAUGOMA UNIT
46	SURGICAL INSTRUMENT SHARPENER, ELECTRIC
47	INSTRUMENT TRAY, MUSCLE, EYE
48	INSTRUMENT TRAY, LID
49	INSTRUMENT TRAY, RETINA
50	 Instrument tray, cataract

LEFT PAGE	11 OPATH (HOSP CORPS) TASK BOOKLET
	1 ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 11 1 OF RESPONSE BOOKLET
1	INSTRUMENT TRAY, GLAUCOMA
2	I INSTRUMENT TRAY, CORNEA
3	I CAUTERY APPARATUS
4	I ISCHEIE CAUTERY UNIT
5	 OPERATING MICROSCOPE, E.G. ZEISS, DIPLOSCOPE
6	 FIBER OPTIC LASER
7	Î ÎRUBY LASER Î
8	 LASER PHOTOCOAGULATOR
9	 SPONGES, SUPGICAL (RADIOPAQUE)
10	 FIBEROPTIC RETRACTORS
11	
12	IPIS FORCEPS
13	LIGHT, ULTRAVIOLET, SPECIMEN EXAMINING
14	
15	COMPRESSED GAS TANKS/CYLINDERS (OTHER THAN OXYGEN)
16	

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